FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response: 0.5

	ess of Reporting Per	rson [*]	2. Issuer Name and Ticker or Trading Symbol SILICON LABORATORIES INC [SLAB]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
BOCK WILLIAM G				X	Director	10% Owner		
(Last) (First) (Middle) 400 WEST CESAR CHAVEZ			3. Date of Earliest Transaction (Month/Day/Year) 09/13/2013	X	Officer (give title Other (speci below) below) President			
(Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line)	idual or Joint/Group Filing	g (Check Applicable		
AUSTIN TX 78701		78701		X	Form filed by One Reporting Person			
(City)	(State)	(Zip)			Form filed by More that Person	n One Reporting		

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)	
Common Stock, \$0.0001 par value	09/13/2013		М		11,133	A	\$32.98	98,117	D		
Common Stock, \$0.0001 par value	09/13/2013		S		11,133(1)	D	\$41	86,984	D		
Common Stock, \$0.0001 par value	09/13/2013		F		610	D	\$41.15	86,374	D		

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		of Deri Secu Acq (A) o Disp of (E	umber vative urities uired or oosed 0) (Instr. and 5)	Expiration Date (Month/Day/Year) tr.		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Non- Qualified Stock Option (right to buy)	\$32.98	09/13/2013		М			11,133	11/08/2007 ⁽²⁾	11/08/2016	Common Stock, \$0.0001 par value	11,133	(3)	145,000	D	

Explanation of Responses:

1. Shares sold pursuant to Reporting Person's 10b5-1 Trading Plan.

2. Option vests and becomes exercisable with respect to (i) twenty percent (20%) of the option shares upon the date exercisable and (ii) the balance of the option shares in a series of forty-eight (48) successive monthly installments over the forty-eight (48) month period measured from the date exercisable.

3. Not applicable per instruction 4(c)(iii).

Saie-Yau Hui for William G.
Bock
** 0: / / 0

09/16/2013

Date

** Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.